Application for Residency Requirement Exception

The University of Utah • Office of the Registrar • 201 S 1460 E RM 250 N • Salt Lake City UT • 84112

Student Name: _____ Student ID #: _____

Major: _____ Expected Graduation Date: _____
                                                                                    Term & Year

Mailing Address: _____ Phone #: _____

All undergraduate students must earn at least 30 semester credit hours from the University of Utah and at least 20 of the last 30 semester credit hours earned towards a student's degree must be earned from the University of Utah. The University's Graduation Committee has approved certain exceptions for this requirement. Please indicate which of the exceptions apply in your case and return this application with the requested documentation to the Graduation Division, window #15 of the Student Services Building before the last day of the term in which you plan to graduate. Scanned copies may also be submitted from Umail to graduation@utah.edu. The Registrar's Office will apply the appropriate exception to your degree audit (DARS) once your qualifications have been confirmed. Indicate the situation(s) that apply to you:

☐ I have 15 or fewer final hours coming from an approved learning abroad or international exchange program (does not apply to U of U courses held at the Asia Campus or other off-campus locations). **Documentation needed:** a support letter from the Center for Learning Abroad on official letterhead.

☐ I have excess transfer hours beyond the normal 10 allowed and those credits are not needed to fulfill graduation requirements. **Documentation needed:** a DARS report showing transfer courses are not being used to meet requirements.

☐ I confronted an involuntary change of residence (owing to military obligations, health, marriage, etc.) and I am within 30 credits of graduation and have earned at least 90 credits from the University of Utah. **Documentation needed:** Letter of support from Department Chairperson and military orders or letters of support from faculty, doctors, employers, etc. all on official letterhead.

Signature: _____ Date: _____

FOR REGISTRAR'S OFFICE USE ONLY

Confirmed   Denied   Date: _____ Comments: _____

Updated: 3.29.16